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Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90105 016 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000089163

1. Corporation Name

ADVANCED CYBERTECH ENTERPRISES, INC.

								i	LULUU LULUU III	AND RIVER HAN TO	
Principal Place	e of Business	Ma	ailing Address	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/15/1997 4. FEI Number 65-0787591 Applied For Not Applicable Apt. #, etc. 5. Certificate of Status Desired Country 8. This corporation owes the current year Intangible Personal Property Tax. Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 16 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered chickname was authorized by the corporation's board of directors. I hereby accept the appointment as registered con 607.0505, Florida Statutes.							
800 E. BROWARD BLVD., STE. 700 800 E. BROWARD BLVD., STE FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301					. 700						
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2 Principal P	lace of Business	20	Mailing Addr						\Box	Applied For	
└ '	lace of Busiliess	26	Mailing Addi	655				l	├		
Suite, Apt.	# atc	26	Suite Ant #	etc							
22 Suite, Apr.	#, etc.	27	Oute, rept. #	, 010.				-5. Certifcate:of Status Desired - □			
City & State	<u> </u>	- 21	City & State					s Election Compaign Financing	\$5.0	O May Re	
23	•	28	July 2 - 1014					1 **	T		
Zip	Country	1201	Zip		Countr	у			tangible		
24	25	29	•	30	7	•		1	_	□No	
24	9. Name and Address of Curren		tered Agent						Agent		
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FT. i	AUDERDALE FL 33301				L	1					
					8-	4 City		FI	85 Zi	p Code	
44 5	to the american of Continue CD7 0500	2 - pd 6	07 1500 Flori	ida Statutos	the che	un named	cornor		changing	its registered	
office or n	egistered agent, or both, in the State of	of Florid	la. Such chan	ige was auth	orized b	y the corp	oration	's board of directors. I hereby accept the appoint	intment as	registered	
agent. I a	m familiar with, and accept the obligat	ions of	Section 607.	0505, Florida	a Statute	s.					
SIGNATURE								DATE			
	Signature, typed or printed name of registered agen OFFICERS AN			(NOTE: Re		ent signature	required v	tion (enough	ID DIBEC	TOPS IN 12	
12.	D OFFICERS AN	שאוע ט		EI ETE			т	ADDITIONS/CHANGES TO OFFICERS A			
TITLE			ب ت				1				
NAME	BODMER, RETO								•		
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NAME	WOLF, JAIMEE										
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NAME					4. 2 NAMI	=					

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a attackment with an appress, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ DELETÉ

DELETE

☐ Change

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☐ Addition

Addition